## **FAX COVER SHEET**

## FOR FILING IN THE SUPERIOR COURT OF KITSAP COUNTY IN AND FOR THE STATE OF WASHINGTON (per GR 17)

(This service available only to members of the WSBA)

David T. Lewis III, Kitsap County Clerk (360) 337-7164 FAX (360) 337-4927

Cause Number:	Case caption: vs.	
# Pages (not including this cover sheet):	Date:	
Firm Name:	Person Filing: Bar Assoc. Number:	
Address:	City/State/Zip:	
Phone Number: ( )	FAX Number: ( )	
Fax Fee = \$5.00/1st page + \$1.00 per ea	ch page thereafter (ALWAYS impo	sed)
Please file this FAX in the Court File.		
Please forward this FAX to:		
Additional Fee of \$10 imposed for requested	copies per each 25 pages (or port	ion thereof)
Please make and forward a copy of the attached fax to: _		
Page Limit: 20 pages during regular business hours (8 advance permission has been granted by the Clerk's Office before noon). The fax cover sheet is not included in the 2 after regular business hours.	e (permission will NOT be granted on T	hursdays
Filing Fee: Documents requiring filing fees may not be petitions or complaints, jury demands, writs, notices of app		o, original
Fax Fee Payment Notice	FAX FEE	
I am mailing my business check or money order today, payable to "Kitsap County Clerk", 614 Division Street, MS-34,	# Pages Faxed (less cover sheet):	
Port Orchard, WA 98366-4692. (Please enclose a photocopy of this cover sheet with payment to ensure proper credit).	Fax Fee:	\$
or this cover sheet with payment to ensure proper credity.	Extra copy request charge:	\$
Signature: Date:	Total:	\$

**USE ONLY THIS COVER SHEET TO FILE BY FAX** 

For Internal Use	
Fax Rec'd by:	
Bench copies made: Y N	
Date to Sup. Ct:	